



TOWN OF AFTON YOUTH BASEBALL Registration Form

\$25.00 Registration Fee

DEADLINE: FRIDAY APRIL 17, 2015 5:00 PM

Please indicate which league you would like your child to play.

- () T-ball - (ages 4-6)
() Coach pitch (ages 6-8)
() Minor League (ages 9-10)
() Major League (ages 11-12)

Name of Player _____

Physical Address _____

Name of Parent or Guardian _____

Home Phone # _____ Alternate Phone # _____

Player's Birth Date _____ Grade _____

In Emergency Notify _____ Telephone # _____
(Other than above parent)

PARENT'S AGREEMENT

- (1) I hereby certify that my above named child, is in good health and capable of participating safely in the Town of Afton Baseball Program and the Town of Afton Recreation Department and all other participative agencies are not liable for any accident while participating in the Town Of Afton Youth Baseball Program.
- (2) I hereby authorize the Directors of the Town of Afton Youth Baseball Program to act in my behalf in accordance with their best judgment in case of an emergency.
- (3) I understand the goals and objectives of the Town of Afton Youth Baseball Program, which are based on fun, fair play, skill development, and teamwork.
- (4) I, as a parent or guardian, am willing to participate as a volunteer in support of the Program.

___ Coach ___ Assistant Coach If volunteering, please provide an email address:

Signature of Parent or Guardian _____

Jersey Size: Youth YXS YS YM YL
(Circle One) Adult AS AM AL AXL

**RETURN THIS FORM TO THE AFTON TOWN HALL 416 S. WASHINGTON STREET
CALL 885-9831 WITH ANY QUESTIONS**